



Application for Permit for  
Aboveground Storage of  
Flammable and Combustible Liquids

Maine Department of Public Safety  
**Office of the State Fire Marshal**  
52 State House Station  
Augusta, Maine 04333-0052  
(207) 626-3880  
(207) 287-6251 (fax)  
mainefiremarshal.com

Copy this form as needed.  
Use additional sheets as needed.

Permit #:
Date Issued:
Site Permanent ID#:
<b>ACTION:</b> <input type="checkbox"/> Approved per plan <input type="checkbox"/> Approved per plan and inspection <input type="checkbox"/> Denied By:  Date:
<b>FEE:</b> Amount:  Date Received:  Check Number:

**Facility:**

Name of Facility:		DEP Registration # (if any):
Location of Facility:		
City/Town:	County:	Legal Address:
Facility Telephone:	Contact Person:	Contact Telephone:

**Owner/Permit Holder:**

(Information that is to appear on Permit)

Name of Owner or Permit Holder:		
Mailing Address:		
City/Town:	State:	Zip Code:
Owner Telephone:	Fax:	E-mail/Other

**Applicant:**

Name of Applicant:		
Mailing Address:		
City/Town:	State:	Zip Code:
Applicant Telephone:	Fax:	E-mail/Other
<b>APPLICANT'S SIGNATURE:</b>		<b>DATE:</b>
<input checked="" type="checkbox"/> Original Permit to Owner/Permit Holder <input type="checkbox"/> Duplicate Permit for Facility. (A copy of the permit must be available at the facility) <input type="checkbox"/> Copy of Permit to Applicant <input checked="" type="checkbox"/> Copy of Permit to Fire Department		

**Fee:**

<input type="checkbox"/> \$ 15.00	Fee for Permit for Aboveground Storage of Flammable and Combustible Liquids
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**Application Type:**

<input type="checkbox"/> New Facility (No existing permits)	<input type="checkbox"/> Change of Facility (Indicate Change Below)
<input type="checkbox"/> Existing Facility (Enclose copy of existing permit)	(Enclose copy of existing permit)
<input type="checkbox"/> Change of Ownership (Enclose copy of existing permit)	<input type="checkbox"/> Addition or Removal of Tank
	<input type="checkbox"/> Replacement of Tank
	<input type="checkbox"/> Change of Product